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INFORMATION DISCLOSURE
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(Use as many sheets as necessary)

Sheet 1 of 2

Complete if Known

Application Number	10/743,885
Filing Date	12/22/03
First Named Inventor	Jason OTTO
Art Unit	3733
Examiner Name	Eduardo C. ROBERT
Attorney Doctor Number	10557/294282

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Examiner Initials -	Cas No. ¹	Document Number Number - Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Examiner or Applicant of Cited Document	Pages, Column, Lines, Where Relevant Passages or Sentences Appears
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TJS/					

Examiner Signature	/Thomas J Sweet/ (03/22/2007)	Date Considered
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¹EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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